

TOP 30 RBRVS CODES By Dollar Volume (for dates of service from 7/1/04-6/30/05)		Non-facility Setting			Facility Setting		
		Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change	Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change
99213	Office/outpatient visit, est	\$70.00	\$71.96	+2.8%	\$47.00	\$48.32	+2.8%
99214	Office/outpatient visit, est	\$109.50	\$113.08	+3.3%	\$78.00	\$80.70	+3.5%
90806	Psytx, off, 45-50 min	\$131.00	\$134.67	+2.8%	\$126.00	\$129.01	+2.4%
97110	Therapeutic exercises	\$37.00	\$38.04	+2.8%	\$37.00	\$38.04	+2.8%
99396	Prev visit, est, age 40-64	\$142.50	\$147.52	+3.5%	\$109.00	\$112.57	+3.3%
97140	Manual therapy	\$35.00	\$35.98	+2.8%	\$35.00	\$35.98	+2.8%
88305	Tissue exam by pathologist	\$137.50	\$142.38	+3.5%	\$137.50	\$142.38	+3.5%
99244	Office consultation	\$228.50	\$236.44	+3.5%	\$182.50	\$188.12	+3.1%
76092	Mammogram, screening	\$113.50	\$117.19	+3.3%	\$113.50	\$117.19	+3.3%
92014	Eye exam & treatment	\$128.00	\$132.10	+3.2%	\$80.50	\$82.75	+2.8%
97530	Therapeutic activities	\$39.00	\$40.09	+2.8%	\$39.00	\$40.09	+2.8%
70553	Mri brain w/o&w dye	\$1,481.50	\$1,535.32	+3.6%	\$1,481.50	\$1,535.32	+3.6%
99243	Office consultation	\$162.50	\$167.56	+3.1%	\$123.50	\$127.47	+3.2%
92004	Eye exam, new patient	\$172.00	\$177.33	+3.1%	\$120.00	\$123.87	+3.2%
99212	Office/outpatient visit, est	\$51.50	\$52.94	+2.8%	\$32.00	\$32.90	+2.8%
90807	Psytx, off, 45-50 min w/e&m	\$139.00	\$143.41	+3.2%	\$135.50	\$139.29	+2.8%
59400	Obstetrical care	\$2,156.50	\$2,227.68	+3.3%	\$2,156.50	\$2,227.68	+3.3%
99203	Office/outpatient visit, new	\$128.50	\$132.61	+3.2%	\$95.50	\$98.17	+2.8%
92015	Refraction	\$95.00	\$98.69	+3.9%	\$27.00	\$27.76	+2.8%
73721	Mri joint of lwr extre w/o d	\$678.00	\$702.64	+3.6%	\$678.00	\$702.64	+3.6%
99215	Office/outpatient visit, est	\$159.00	\$163.97	+3.1%	\$125.00	\$129.01	+3.2%
72148	Mri lumbar spine w/o dye	\$761.00	\$788.99	+3.7%	\$761.00	\$788.99	+3.7%
99395	Prev visit, est, age 18-39	\$129.00	\$133.13	+3.2%	\$96.50	\$99.72	+3.3%
78465	Heart image (3d), multiple	\$727.00	\$753.01	+3.6%	\$727.00	\$753.01	+3.6%
45378	Diagnostic colonoscopy	\$509.50	\$527.36	+3.5%	\$272.00	\$280.64	+3.2%
97001	Pt evaluation	\$100.50	\$103.31	+2.8%	\$85.00	\$87.89	+3.4%
99245	Office consultation	\$295.50	\$305.32	+3.3%	\$243.00	\$250.83	+3.2%
99204	Office/outpatient visit, new	\$181.50	\$187.10	+3.1%	\$141.50	\$145.46	+2.8%
97112	Neuromuscular reeducation	\$39.00	\$40.09	+2.8%	\$39.00	\$40.09	+2.8%
72193	CT pelvis w/dye	\$442.00	\$457.97	+3.6%	\$442.00	\$457.97	+3.6%
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EVALUATION AND MANAGEMENT		Non-facility Setting			Facility Setting		
		Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change	Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change
99201	Office/outpatient visit, new	\$48.50	\$50.37	+3.9%	\$31.50	\$32.38	+2.8%
99202	Office/outpatient visit, new	\$86.50	\$88.92	+2.8%	\$62.00	\$63.74	+2.8%
99203	Office/outpatient visit, new	\$128.50	\$132.61	+3.2%	\$95.50	\$98.17	+2.8%
99204	Office/outpatient visit, new	\$181.50	\$187.10	+3.1%	\$141.50	\$145.46	+2.8%
99205	Office/outpatient visit, new	\$229.50	\$237.98	+3.7%	\$188.00	\$194.29	+3.3%
99211	Office/outpatient visit, est	\$29.00	\$29.81	+2.8%	\$12.00	\$12.34	+2.8%
99212	Office/outpatient visit, est	\$51.50	\$52.94	+2.8%	\$32.00	\$32.90	+2.8%
99213	Office/outpatient visit, est	\$70.00	\$71.96	+2.8%	\$47.00	\$48.32	+2.8%
99214	Office/outpatient visit, est	\$109.50	\$113.08	+3.3%	\$78.00	\$80.70	+3.5%
99215	Office/outpatient visit, est	\$159.00	\$163.97	+3.1%	\$125.00	\$129.01	+3.2%
99231	Subsequent Hospital Care	\$45.00	\$46.26	+2.8%	\$45.00	\$46.26	+2.8%
99232	Subsequent Hospital Care	\$73.50	\$76.07	+3.5%	\$73.50	\$76.07	+3.5%
99241	Office Consultation	\$66.50	\$68.88	+3.6%	\$45.50	\$46.77	+2.8%
99242	Office Consultation	\$121.50	\$125.42	+3.2%	\$92.00	\$95.09	+3.4%
99243	Office Consultation	\$162.50	\$167.56	+3.1%	\$123.50	\$127.47	+3.2%
99244	Office Consultation	\$228.50	\$236.44	+3.5%	\$182.50	\$188.12	+3.1%
99245	Office Consultation	\$295.50	\$305.32	+3.3%	\$243.00	\$250.83	+3.2%
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MATERNITY SERVICES		Non-facility Setting			Facility Setting		
		Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change	Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change
<i>Incision</i>							
59000	Amniocentesis, diagnostic	\$183.00	\$189.67	+3.6%	\$112.00	\$115.65	+3.3%
59025	Fetal Non Stress-Global	\$54.50	\$57.05	+4.7%	\$54.50	\$57.05	+4.7%
59025-26	Fetal Non Stress-Professional	\$42.00	\$43.69	+4.0%	\$42.00	\$43.69	+4.0%
59025-TC	Fetal Non Stress-Technical	\$12.50	\$12.85	+2.8%	\$12.50	\$12.85	+2.8%
<i>Antepartum Care</i>							
59425	Antepartum care only	\$500.50	\$517.08	+3.3%	\$381.00	\$393.72	+3.3%
59426	Antepartum care only	\$878.00	\$907.72	+3.4%	\$658.50	\$679.51	+3.2%
<i>Labor and Vaginal Delivery</i>							
59400	Obstetrical care	\$2,156.50	\$2,227.68	+3.3%	\$2,156.50	\$2,227.68	+3.3%
59409	Obstetrical care	\$1,075.50	\$1,110.75	+3.3%	\$1,075.50	\$1,110.75	+3.3%
59410	Obstetrical care	\$1,203.00	\$1,242.34	+3.3%	\$1,203.00	\$1,242.34	+3.3%
<i>Postpartum Care</i>							
59430	Care after delivery	\$190.00	\$195.83	+3.1%	\$175.00	\$180.41	+3.1%
<i>Cesarean Delivery</i>							
59510	Cesarean delivery	\$2,156.50	\$2,227.68	+3.3%	\$2,156.50	\$2,227.68	+3.3%
59514	Cesarean delivery only	\$1,075.50	\$1,110.75	+3.3%	\$1,075.50	\$1,110.75	+3.3%
59515	Cesarean delivery	\$1,203.00	\$1,242.34	+3.3%	\$1,203.00	\$1,242.34	+3.3%
59525	Remove uterus after cesarean	\$674.50	\$695.96	+3.2%	\$674.50	\$695.96	+3.2%
<i>Delivery After Previous C-Section</i>							
59610	Vbac delivery	\$2,276.50	\$2,352.06	+3.3%	\$2,276.50	\$2,352.06	+3.3%
59612	Vbac delivery only	\$1,207.50	\$1,246.45	+3.2%	\$1,207.50	\$1,246.45	+3.2%
59614	Vbac care after delivery	\$1,328.50	\$1,371.35	+3.2%	\$1,328.50	\$1,371.35	+3.2%
59618	Attempted vbac delivery	\$2,586.00	\$2,671.26	+3.3%	\$2,586.00	\$2,671.26	+3.3%
59620	Attempted vbac delivery only	\$1,390.50	\$1,435.09	+3.2%	\$1,390.50	\$1,435.09	+3.2%
59622	Attempted vbac after care	\$1,569.50	\$1,620.13	+3.2%	\$1,569.50	\$1,620.13	+3.2%
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TOP 30 MOST CHANGED RBRVS FEES (by dollar change in non-facility fee, from top 300 codes)		Non-facility Setting			Facility Setting		
		Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Dollar change	Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Dollar change
53850	Prostatic microwave thermotx	\$5,284.00	\$5,480.27	+\$196.27	\$701.00	\$723.20	+\$22.20
58563	Hysteroscopy, ablation	\$3,196.50	\$3,314.79	+\$118.29	\$479.00	\$494.47	+\$15.47
93526	Rt & Lt heart catheters	\$3,039.00	\$3,151.85	+\$112.85	\$3,039.00	\$3,151.85	+\$112.85
36478	Endovenous laser, 1st vein	\$2,730.50	\$2,831.63	+\$101.13	\$481.00	\$496.01	+\$15.01
33533	CABG, arterial, single	\$2,517.00	\$2,606.49	+\$89.49	\$2,517.00	\$2,606.49	+\$89.49
93510	Left heart catheterization	\$2,312.50	\$2,398.32	+\$85.82	\$2,312.50	\$2,398.32	+\$85.82
59400	Obstetrical care	\$2,156.50	\$2,227.68	+\$71.18	\$2,156.50	\$2,227.68	+\$71.18
59510	Cesarean delivery	\$2,156.50	\$2,227.68	+\$71.18	\$2,156.50	\$2,227.68	+\$71.18
22612	Lumbar spine fusion	\$1,952.50	\$2,019.51	+\$67.01	\$1,952.50	\$2,019.51	+\$67.01
36561	Insert tunneled cv cath	\$1,828.00	\$1,894.60	+\$66.60	\$473.50	\$488.81	+\$15.31
27447	Total knee arthroplasty	\$1,971.50	\$2,036.98	+\$65.48	\$1,971.50	\$2,036.98	+\$65.48
77295	Set radiation therapy field	\$1,793.50	\$1,858.62	+\$65.12	\$1,793.50	\$1,858.62	+\$65.12
55845	Extensive prostate surgery	\$2,067.50	\$2,132.07	+\$64.57	\$2,067.50	\$2,132.07	+\$64.57
44145	Partial removal of colon	\$2,005.00	\$2,069.36	+\$64.36	\$2,005.00	\$2,069.36	+\$64.36
63075	Neck spine disk surgery	\$1,770.00	\$1,832.41	+\$62.41	\$1,770.00	\$1,832.41	+\$62.41
67038	Strip retinal membrane	\$1,894.00	\$1,955.77	+\$61.77	\$1,894.00	\$1,955.77	+\$61.77
22554	Neck spine fusion	\$1,737.00	\$1,798.49	+\$61.49	\$1,737.00	\$1,798.49	+\$61.49
27130	Total hip arthroplasty	\$1,825.00	\$1,886.38	+\$61.38	\$1,825.00	\$1,886.38	+\$61.38
63042	Laminotomy, single lumbar	\$1,618.50	\$1,677.18	+\$58.68	\$1,618.50	\$1,677.18	+\$58.68
92980	Insert intracoronary stent	\$1,070.50	\$1,127.72	+\$57.22	\$1,070.50	\$1,127.72	+\$57.22
72157	Mri chest spine w/o & w/dye	\$1,495.00	\$1,549.71	+\$54.71	\$1,495.00	\$1,549.71	+\$54.71
72156	Mri neck spine w/o & w/dye	\$1,496.00	\$1,550.22	+\$54.22	\$1,496.00	\$1,550.22	+\$54.22
70553	Mri brain w/o & w/ dye	\$1,481.50	\$1,535.32	+\$53.82	\$1,481.50	\$1,535.32	+\$53.82
72158	Mri lumbar spine w/o & w/dye	\$1,481.50	\$1,535.32	+\$53.82	\$1,481.50	\$1,535.32	+\$53.82
74183	Mri abdomen w/o & w/dye	\$1,458.00	\$1,511.67	+\$53.67	\$1,458.00	\$1,511.67	+\$53.67
72197	Mri pelvis w/o & w/dye	\$1,458.00	\$1,511.67	+\$53.67	\$1,458.00	\$1,511.67	+\$53.67
70543	Mri orbt/fac/nck w/o & w dye	\$1,447.50	\$1,500.88	+\$53.38	\$1,447.50	\$1,500.88	+\$53.38
73720	Mri lwr extremity w/o&w/dye	\$1,447.00	\$1,500.37	+\$53.37	\$1,447.00	\$1,500.37	+\$53.37
44140	Partial removal of colon	\$1,600.50	\$1,652.00	+\$51.50	\$1,600.50	\$1,652.00	+\$51.50
76094	Magnetic image, both breasts	\$1,378.00	\$1,429.43	+\$51.43	\$1,378.00	\$1,429.43	+\$51.43

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		Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change	Max Fee 7/1/05 CF=\$50.00	Max Fee 7/1/06 CF=\$51.40	Percent change
92980	Insert intracoronary stent	\$1,070.50	\$1,127.72	+5.3%	\$1,070.50	\$1,127.72	+5.3%
95115	Immunotherapy, one injection	\$20.50	\$21.59	+5.3%	\$20.50	\$21.59	+5.3%
95117	Immunotherapy injections	\$26.00	\$27.24	+4.8%	\$26.00	\$27.24	+4.8%
76083	Computer mammogram add-on	\$26.00	\$27.24	+4.8%	\$26.00	\$27.24	+4.8%
59025	Fetal non-stress test	\$54.50	\$57.05	+4.7%	\$54.50	\$57.05	+4.7%
97124	Massage therapy	\$29.50	\$30.84	+4.5%	\$29.50	\$30.84	+4.5%
98940	Chiropractic manipulation	\$34.50	\$35.98	+4.3%	\$29.00	\$29.81	+2.8%
93000	Electrocardiogram, complete	\$35.50	\$37.01	+4.3%	\$35.50	\$37.01	+4.3%
73620	X-ray exam of foot	\$36.50	\$38.04	+4.2%	\$36.50	\$38.04	+4.2%
71010	Chest x-ray	\$37.00	\$38.55	+4.2%	\$37.00	\$38.55	+4.2%
73560	X-ray exam of knee, 1 or 2	\$39.00	\$40.61	+4.1%	\$39.00	\$40.61	+4.1%
73030	X-ray exam of shoulder	\$43.00	\$44.72	+4.0%	\$43.00	\$44.72	+4.0%
73562	X-ray exam of knee, 3	\$43.00	\$44.72	+4.0%	\$43.00	\$44.72	+4.0%
76075	Dexa, axial skeleton study	\$184.50	\$191.72	+3.9%	\$184.50	\$191.72	+3.9%
20610	Drain/inject, joint/bursa	\$92.00	\$95.60	+3.9%	\$65.00	\$67.33	+3.6%
92015	Refraction	\$95.00	\$98.69	+3.9%	\$27.00	\$27.76	+2.8%
71020	Chest x-ray	\$48.00	\$49.86	+3.9%	\$48.00	\$49.86	+3.9%
73564	X-ray exam, knee, 4 or more	\$48.00	\$49.86	+3.9%	\$48.00	\$49.86	+3.9%
72100	X-ray exam of lower spine	\$50.50	\$52.43	+3.8%	\$50.50	\$52.43	+3.8%
77418	Radiation tx delivery, imrt	\$921.50	\$956.55	+3.8%	\$921.50	\$956.55	+3.8%
96910	Photochemotherapy with UV-B	\$52.00	\$53.97	+3.8%	\$52.00	\$53.97	+3.8%
77336	Radiation physics consult	\$158.00	\$163.97	+3.8%	\$158.00	\$163.97	+3.8%
93970	Extremity study	\$319.50	\$331.53	+3.8%	\$319.50	\$331.53	+3.8%
76700	Us exam, abdom, complete	\$160.50	\$166.54	+3.8%	\$160.50	\$166.54	+3.8%
93325	Doppler color flow add-on	\$161.50	\$167.56	+3.8%	\$161.50	\$167.56	+3.8%
74150	Ct abdomen w/o dye	\$381.50	\$395.78	+3.7%	\$381.50	\$395.78	+3.7%
93880	Extracranial study	\$328.50	\$340.78	+3.7%	\$328.50	\$340.78	+3.7%
76094	Magnetic image, both breasts	\$1,378.00	\$1,429.43	+3.7%	\$1,378.00	\$1,429.43	+3.7%
72192	Ct pelvis w/o dye	\$388.00	\$402.46	+3.7%	\$388.00	\$402.46	+3.7%
53850	Prostatic microwave thermotx	\$5,284.00	\$5,480.27	+3.7%	\$701.00	\$723.20	+3.2%

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